ISSUE SLIP STAPLE AREA (for additional cross references)

POSTUN	INITIALS	ID NO.	DATE
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FEE DETERMINATION	HC		8-29-0
OIIPE CLASSIFIER		-10/	019
FORMALITY REVIEW	SI	1081	109/27/01
RESPONSE FORMALITY REVIEW	·		7

INDEX OF CLAIMS

J	Rejected	N	Non-elected
	Allowed	Ī	Interference
	(Through numeral) Canceled	Α	Appeal
	Restricted		Objected

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Claim Date	Claim	Date	Claim	Date			
Original 4/14/03	Final		Final				
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27	77		127				
28	78		128				
29	79		129				
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49	99		149				
50	100		150				

Mark State

If more than 150 claims or 10 actions staple additional sheet here

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Best Available Copy